

Attachment A

IN THE UNITED STATES DISTRICT COURT  
FOR THE NORTHERN DISTRICT OF WEST VIRGINIA

FILED  
NOV 30 2020  
U.S. DISTRICT COURT-WVND  
WHEELING, WV 26003

Betty Francois

# 14402030

Your full name

FEDERAL CIVIL RIGHTS  
COMPLAINT  
(BIVENS ACTION)

v.

Civil Action No.: pending  
(To be assigned by the Clerk of Court)

SFF Hazelton  
Warden

3:20 cv 217

Grob  
Trumbert  
Sims

Enter above the full name of defendant(s) in this action

I. JURISDICTION

This is a civil action brought pursuant to **Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics, 403 U.S. 388 (1971)**. The Court has jurisdiction over this action pursuant to Title 28 U.S.C. §§ 1331 and 2201.

II. PARTIES

In Item A below, place your full name, inmate number, place of detention, and complete mailing address in the space provided.

A. Name of Plaintiff: Betty Francois Inmate No.: 14402030  
Address: PO Box 1731  
Waseca MN 56093

In Item B below, place the full name of each defendant, his or her official position, place of employment, and address in the space provided.

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B. Name of Defendant: SFF Hazelton  
 Position: SFF Hazelton  
 Place of Employment: SFF Hazelton  
 Address: PO BOX 450  
Bruceston Mills, WV 26525-5001

Was this Defendant acting under the authority or color of federal state law at the time these claims occurred? ☒ Yes ☐ No

If your answer is "YES," briefly explain: I was a ward of DOJ and housed at SFF Hazelton by FBOP assignment

B.1 Name of Defendant: Warden  
 Position: Warden  
 Place of Employment: SFF Hazelton  
 Address: PO BOX 450  
Bruceston Mills, WV 26525

Was this Defendant acting under the authority or color of federal state law at the time these claims occurred? ☒ Yes ☐ No

If your answer is "YES," briefly explain: in trust "authority over compound management and operations"

B.2 Name of Defendant: N/A  
 Position: \_\_\_\_\_  
 Place of Employment: \_\_\_\_\_  
 Address: \_\_\_\_\_

Was this Defendant acting under the authority or color of federal state law at the time these claims occurred? ☐ Yes ☐ No

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If your answer is "YES," briefly explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

B.3 Name of Defendant: N/A  
Position: \_\_\_\_\_  
Place of Employment: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Was this Defendant acting under the authority or color of federal state law at the time these claims occurred? ☐ Yes ☐ No

If your answer is "YES," briefly explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

B.4 Name of Defendant: N/A  
Position: \_\_\_\_\_  
Place of Employment: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Was this Defendant acting under the authority or color of federal state law at the time these claims occurred? ☐ Yes ☐ No

If your answer is "YES," briefly explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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B.5 Name of Defendant: N/A  
 Position: \_\_\_\_\_  
 Place of Employment: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_

Was this Defendant acting under the authority or color of federal state law at the time these claims occurred? ☐ Yes ☐ No

If your answer is "YES," briefly explain: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### III. PLACE OF PRESENT CONFINEMENT

Name of Prison/ Institution: FCI Waseca

A. Is this where the events concerning your complaint took place?  
☐ Yes ☒ No

If you answered "NO," where did the events occur?

SFF Hazelton

B. Is there a prisoner grievance procedure in the institution where the events occurred? ☒ Yes ☐ No

C. Did you file a grievance concerning the facts relating to this complaint in the prisoner grievance procedure?  
☐ Yes ☒ No

D. If your answer is "NO," explain why not: fear of retaliation  
and abuse of power

E. If your answer is "YES," identify the administrative grievance procedure number(s) in which the claims raised in this complaint were addressed

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and state the result at level one, level two, and level three. **ATTACH GRIEVANCES AND RESPONSES:**

LEVEL 1 N/A  
 LEVEL 2 N/A  
 LEVEL 3 N/A

IV. **PREVIOUS LAWSUITS AND ADMINISTRATIVE REMEDIES**

A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action? ☐ Yes ☒ No

B. If your answer is "YES", describe each lawsuit in the space below. If there is more than one lawsuit, describe additional lawsuits using the same format on a separate piece of paper which you should attach and label: "IV PREVIOUS LAWSUITS"

1. Parties to this previous lawsuit:

Plaintiff(s): N/A

Defendant(s): N/A

2. Court: N/A  
*(If federal court, name the district; if state court, name the county)*

3. Case Number: N/A

4. Basic Claim Made/Issues Raised: N/A

5. Name of Judge(s) to whom case was assigned:  
N/A

6. Disposition: N/A  
*(For example, was the case dismissed? Appealed? Pending?)*

7. Approximate date of filing lawsuit: N/A

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8. Approximate date of disposition. Attach Copies: N/A

C. Did you seek informal or formal relief from the appropriate administrative officials regarding the acts complained of in Part B?

☐ Yes ☐ No

D. If your answer is "YES," briefly describe how relief was sought and the result. If your answer is "NO," explain why administrative relief was not sought.

N/A

E. Did you exhaust available administrative remedies?

☐ Yes ☐ No

F. If your answer is "YES," briefly explain the steps taken and attach proof of exhaustion. If your answer is "NO," briefly explain why administrative remedies were not exhausted.

N/A

G. If you are requesting to proceed in this action *in forma pauperis* under 28 U.S.C. § 1915, list each civil action or appeal you filed in any court of the United States while you were incarcerated or detained in any facility that was dismissed as frivolous, malicious, or for failure to state a claim upon which relief may be granted. Describe each civil action or appeal. If there is more than one civil action or appeal, describe the additional civil actions or appeals using the same format on a separate sheet of paper which you should attach and label "G. PREVIOUSLY DISMISSED ACTIONS OR APPEALS"

1. Parties to previous lawsuit:

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Plaintiff(s): N/ADefendant(s): N/A

2. Name and location of court and case number:

N/A3. Grounds for dismissal: ☐ frivolous ☐ malicious  
☐ failure to state a claim upon which relief may be granted4. Approximate date of filing lawsuit: N/A5. Approximate date of disposition: N/AV. STATEMENT OF CLAIM

State here, as **BRIEFLY** as possible, the facts of your case. Describe what each defendant did to violate your constitutional rights. **You must include allegations of specific wrongful conduct as to EACH and EVERY defendant in the complaint.** Include also the names of other persons involved, dates, and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, you must number and set forth each claim in a separate paragraph. **UNRELATED CLAIMS MUST BE RAISED IN SEPARATE COMPLAINTS WITH ADDITIONAL FILING FEES. NO MORE THAN FIVE (5) TYPED OR TEN (10) NEATLY PRINTED PAGES MAY BE ATTACHED TO THIS COMPLAINT. (LR PL 3.4.4)**

CLAIM 1: mass punishment / lockdowns  
preventing recreation, religious services,  
access to law library, and grunge fare,  
shower, phone, email access limited;  
broken water main

Supporting Facts: Institution logs confirming

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dates and times. Have ordered From:  
Freedom of Information  
Privacy Sec Act #924  
320 First Str NW  
Wa, DC 20534

CLAIM 2: Unsafe Housing per OSHA standards.

Supporting Facts: rained inside of RDAP unit and  
buckets dispersed to collect rain water.  
Requesting video footage from FBOP and  
eyewitness statements. Ceiling caved in, left  
unrepaired for an extended period of time.

CLAIM 3: Violation of Right to receive mail,  
mail returned to sender with no mail  
rejection notice served to sender nor the  
inmate receiver.

Supporting Facts: returned to sender with no notice  
given - business, personal, and religious  
correspondence collaborating statements  
and records.

CLAIM 4: Abuse of power by staff, corruption

Supporting Facts: eyewitness accounts, records,  
official documents.



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CLAIM 5: \_\_\_\_\_

Supporting Facts: \_\_\_\_\_

**VI. INJURY**

Describe **BRIEFLY and SPECIFICALLY** how you have been injured and the exact nature of your damages.

punitive damages for negatively impacting ties to community and family through interruption in all forms of communication and rights to inmates continually; fear of retaliation negatively impacted mental health and self esteem continually to negatively impact rehabilitation with reoccurring "flash backs and anxiety"

**VII. RELIEF**

State **BRIEFLY and EXACTLY** what you want the Court to do for you. *Make no legal arguments. Cite no cases or statutes.*

Injunction requiring sensitivity training; monetary damages for punitive damages and ~~out~~ actual damages to mental health; hard time credit to be given to compensate

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**DECLARATION UNDER PENALTY OF PERJURY**

The undersigned declares under penalty of perjury that he/she is the plaintiff in the above action, that he/she has read the above complaint and that the information contained in the complaint is true and accurate. Title 28 U.S.C. § 1746; 18 U.S.C. § 1621.

Executed at FCI Waseca on 11/21/2020.  
(Location) (Date)

Betty Francois  
Your Signature

Attachment E

**IN THE UNITED STATES DISTRICT COURT  
FOR THE NORTHERN DISTRICT OF WEST VIRGINIA**

Betty Francois  
#14402030  
Your full name

v.

3:20 CV 217  
Civil Action No.: pending

SFF Hazelton  
Warden

Enter above the full name of defendant(s) in this action

**Certificate of Service**

I, Betty Francois (your name here), appearing *pro se*, hereby certify that I have served the foregoing Federal Civil Rights Complaint (title of document being sent) upon the defendant(s) by depositing true copies of the same in the United States mail, postage prepaid, upon the following counsel of record for the defendant(s) on 11/23/2020 (insert date here): PO BOX 450  
Bruceton Mills WV  
26525  
(List name and address of counsel for defendant(s))

Betty Francois  
(sign your name)